

DD Waivers GSE HCBS Self-assessment
Companion Guidance

(Guidance and instructions for accessing and completing the self-assessment are still under development)

The Self-Assessment will be completed through an online self-assessment portal.

The following sections contain instructions to provide guidance for responding to questions and determining evidence.

Evidence means the types of documentation that confirm narrative responses and demonstrate compliance with the HCBS requirements. Such evidence/documentation includes but is not limited to, the following:

- Provider Policies & Procedures
- Participant Handbook
- Staff Training Curriculum
- Training Schedules
- Person Centered Service Plan
- Pictures
- Google Map of service location
- Individual and Family Survey Results
- Documentation Records
- Forms

GSE HCBS Self-Assessment Part 1: Provider Information	
Section	Instruction
*Provider Information Provider Name Address Provider NPI/API Number *Contact person Name Title Email Phone	Complete all information
*HCBS Services Provided	Check Group Supported Employment (GSE) Services. When this box is checked, a drop down box will appear. Using a number value, record the number of unique settings/work sites where you provide GSE service.

HCBS Self-Assessment Part 1: Provider Questions

DD Waivers GSE HCBS Self-assessment
Companion Guidance

<p>Questions:</p>	<p>Instructions:</p> <p>Evidence for some questions may be duplicative. You do not need to upload the same evidence multiple times. Simply reference in the narrative response that the evidence was uploaded, reference the question associated with the uploaded evidence and indicate how the evidence demonstrates compliance.</p> <p>Do not upload an entire policy and procedure manual. We are not able to search large documents for specific information. Upload only the pertinent information. Self-assessments with entire policy and procedure manuals and/or extraneous information will not be processed and will be returned to the provider.</p>
<p>Question 1: Are any settings/work locations in which GSE services are provided located in a building that is also a publically or privately operated facility that provides inpatient institutional treatment (e.g. NF, IMD, ICF/IID, hospital)?</p>	<p>Publically or privately operated facilities include a public or private:</p> <p><u>Nursing Facility (NF)</u> – a Medicaid Nursing Facility – (42 CFR 488.301)</p> <p><u>Institution for Mental Disease (IMD) Facility</u> - defined as a hospital, nursing facility, or other institution of more than 16 beds that is primarily engaged in providing diagnosis, treatment or care of persons with mental diseases, including medical attention, nursing care and related services. (42 CFR 435.1010)</p> <p><u>Intermediate Care Facility for Individuals with Intellectual Disability (ICF/IID)</u> – ICF/IID means an institution (or distinct part of an institution) that is primarily for the diagnosis, treatment, or rehabilitation of individuals with intellectual disability or with related conditions. (42 CFR 435.1010)</p> <p><u>Hospital</u> - hospital is primarily engaged in providing, by or under the supervision of physicians, to inpatients (A) diagnostic services and therapeutic services for medical diagnosis, treatment, and care of injured, disabled, or sick persons, or (B) rehabilitation services for the rehabilitation of injured, disabled, or sick persons. (SEC. 1861. [42 U.S.C. 1395x])</p> <p><i>Note: For questions 1 through 4, a GSE worksite located in a particular setting, such as a nursing facility or other institutional setting, does not necessarily mean the setting/worksite is not community-based. The experience of the individual receiving GSE services in that setting and the characteristics of the setting will impact the final compliance determination.</i></p>

DD Waivers GSE HCBS Self-assessment
Companion Guidance

<p>Question 2: Are ANY settings/work locations in which GSE services are provided located in a building on the grounds of, or immediately adjacent to a public institution?</p>	<p>Settings that are located on the same or contiguous property to a public institution or are sharing space with a public institutional setting such as a Virginia State Training Center, public hospital setting, Virginia State Psychiatric Hospital, Nursing Facility.</p> <p><i>Public institution</i> (42 CFR 435.1010) means the public institutional setting is the responsibility of a governmental unit or over which a governmental unit exercises administrative control.</p>
<p>Question 3: Are ANY settings/work sites in which GSE services are provided located in a gated/secure “community” for people with disabilities?</p>	<p>Gated communities are settings that are isolated from the community at large, may be a residential community, housing estate or boarding school that is disability specific containing controlled entrances.</p>
<p>Question 4: Are ANY settings/work locations in which GSE services are provided located in a disability-specific farmstead community?</p>	<p>A disability specific farmstead community is often described as a life sharing community for individuals with disabilities. These settings typically encompass both a home and work environment along with recreational and social activities occurring at the setting. Farmsteads disability specific communities tend to be segregated settings where people receiving HCBS may work, live and recreate with limited opportunities to work side by side with people who do not have disabilities and to engage in the broader community.</p>
<p>Question 5: Do ALL individuals receiving GSE services in ALL of your settings/work locations have the opportunity to engage with people not receiving HCBS services at the worksite?</p>	<p>A YES response indicates this statement is true.</p> <p>Provide a narrative response and identify evidence.</p> <p><i>Evidence of Compliance:</i> Evidence may include provider policies, provider community integration practices, examples of types of engagement and frequency, photos. A few questions to consider:</p> <ul style="list-style-type: none"> • Are individuals invited to the business’s holiday parties and other work related social events? • Do individuals work side by side with other employees not receiving Medicaid HCBS services? • Do individuals take breaks and eat meals with other worksite employees? If so, describe what this looks like in your narrative response.

DD Waivers GSE HCBS Self-assessment
Companion Guidance

<p>Question 6: Part 1 of 2: As an organization, do you have policies outlining the HCBS specific rights of individuals receiving GSE services?</p> <p>Part 2 of 2: If you answered yes, how are those policies made available to individuals and families?</p>	<p>A YES response indicates this statement is true.</p> <p>Provide a narrative description of how policies are made available and identify your evidence. <i>Evidence of Compliance:</i> As evidence attach policies outlining HCBS rights of individual receiving services and how that information is made available to individuals and families. Sign off sheets/documentation of receipt of policy, notification policy, etc...</p>
<p>Question 7: Do paid staff and work site employees, as appropriate, receive training and education on HCBS specific rights of individuals receiving HCBS services and member experience as outlined in HCBS rules?</p>	<p>A YES response indicates this statement is true</p> <p>Provide a narrative response and identify evidence. <i>Evidence of Compliance:</i> Provider policies specific to HCBS rights of individuals, staff training policy and records/documentation, an overview of how member experience is documented...</p>
<p>Question 8: As a provider, do you ensure freedom from coercion and restraint?</p>	<p>A YES response indicates this statement is true</p> <p>Provide a narrative response and identify evidence. <i>Evidence of Compliance:</i> Evidence may consist of staff training, policies and procedures, strategies and practice for determining individual choices and preferences, organizational practices related to Positive Behavioral Supports.</p>
<p>Question 9: Does the person centered service planning process ensure individuals' choices and preferences are honored and respected?</p>	<p>A YES response indicates this statement is true</p> <p>How are choices and preference identified in the PCP meeting? And, how are an individual's choices and preferences incorporated into their services?</p> <p>Provide a narrative response and identify evidence. <i>Evidence of Compliance:</i> policies and procedures, staff training, forms and documentation, examples of choices and preferences being honored and how those examples represent an organizational practice, etc...</p>

DD Waivers GSE HCBS Self-assessment
Companion Guidance

HCBS Self-Assessment Part 2 should be completed for EACH unique setting/worksites where GSE HCBS services are provided. In other words, Part 2 may be completed multiple times if you operate GSE services in multiple locations/job sites. The individual completing Part 2 may be different than the individual who completed Part 1. Please provide the requested provider and HCBS setting information.

Questions	Instructions
Question 10: Is the GSE setting/work location integrated into the community?	<p>A YES response indicates this statement is true</p> <p>For the purposes of HCBS settings requirements integration includes both physical integration and social integration.</p> <p><i>Evidence of Compliance:</i> Evidence may consist of a pdf/scanned copy of a google map of the location, pictures of the setting, description of the location of the work site, etc...</p>
Question 11: Are relationships with people not receiving Medicaid HCBS services, for example other worksite members, fostered?	<p>A YES response indicates this statement is true of the setting you are assessing.</p> <p>Provide a narrative response and identify evidence.</p> <p><i>Evidence of Compliance:</i> Evidence may consist of a policy or procedure, anecdotal examples including photos, relationship building strategies, verification of fostering the development of relationships from individuals/families, participation in worksite special events (holiday parties, teambuilding activities, etc...)</p>
Question 12: Do individuals receiving services, or a person of their choosing, have an active role in the development and update of their person-centered service plan?	<p>A YES response indicates this statement is true in the setting you are assessing.</p> <p>Provide a narrative response and identify evidence.</p> <p><i>Evidence of Compliance:</i> Evidence may consist of an overview of the service planning process, verification from individuals/families of their participation, planning meeting letters (invitations) inviting participants, etc...</p>
Question 13: Does the setting/worksites ensure freedom from coercion and restraint?	<p>A YES response indicates this statement is true in the setting you are assessing.</p> <p>Describe specific actions and/or methods employed to ensure individuals' freedom from coercion and restraint.</p> <p><i>Evidence of Compliance:</i> Evidence may consist of, staff training, policies and procedures, etc...</p>
Question 14: How are individuals' choices and preferences honored and respected? For example, with whom to interact during break time, meal/lunch preferences, and with control of personal resources.	<p>Describe person centered service planning and how choice and preferences are honored.</p> <p><i>Evidence of Compliance</i> will provide examples how choice and preference are honored and respected, such as - policies and procedures, staff training, forms and documentation, individual/family experience, etc...</p>

DD Waivers GSE HCBS Self-assessment
Companion Guidance

Question 15. Do individuals receiving GSE supports work directly with other worksite employees not receiving HCBS?	<p>A YES response indicates this statement is true in the GSE setting you are assessing.</p> <p>Provide a narrative response and identify evidence.</p> <p><i>Evidence of Compliance:</i> Evidence may consist of photos, position descriptions, organizational chart, verification from job coach/support staff, etc...</p>
---	--